



HIV/AIDS, STD & TB Prevention MARYLAND

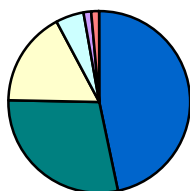
HIV/AIDS Epidemic

Maryland reported 26,918 cumulative AIDS cases to CDC as of December 2003.

Cumulative AIDS Diagnoses by Mode of Exposure, through 2002

*N = 23,527

SOURCE: Maryland Department of Health and Mental Hygiene



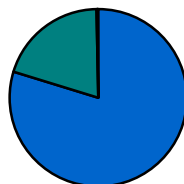
*Percentage totals may be greater or less than 100 due to rounding. Unspecified and missing risk are not included.

- IDU (47%)
- MSM (29%)
- Heterosexual Sex (17%)
- MSM/IDU (5%)
- Hemophiliac/Transfusion (2%)
- Pediatric (1%)

Cumulative AIDS Diagnoses by Race/Ethnicity, through 2002

N = 24,889

SOURCE: Maryland Department of Health and Mental Hygiene



- African American (78%)
- White (20%)
- Hispanic (2%)

Sexually Transmitted Diseases (STDs)

Syphilis

Primary and secondary (P&S) syphilis (the stages when syphilis is most infectious) remains a problem in the southern U.S. and in some urban areas. In Maryland, the rate of P&S syphilis decreased 37% from 1995-2004.

- Maryland ranked 2nd among the 50 states with 6.9 cases of P&S syphilis per 100,000 persons.
- The number of congenital syphilis cases decreased from 28 in 1995 to 10 in 2004.

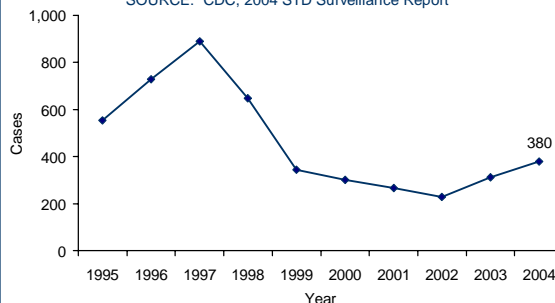
Chlamydia and Gonorrhea

Chlamydial and gonorrheal infections in women are usually asymptomatic and often go undiagnosed. Untreated, these infections can lead to pelvic inflammatory disease (PID), which can cause tubal infertility, ectopic pregnancy and chronic pelvic pain.

- Maryland ranked 12th among the 50 states in chlamydial infections (362.2 per 100,000 persons) and 12th in the rate of gonorrhea infections (150.6 per 100,000 persons).
- The rate of chlamydia among Maryland women (566.5 cases per 100,000 females) was 3.9 times greater than the rate among Maryland men (144.1 cases per 100,000 males).

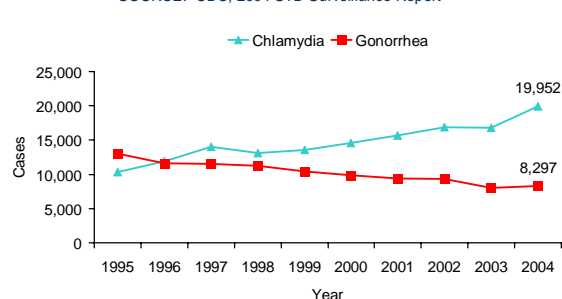
P&S Syphilis Cases in Maryland, 1995-2004

SOURCE: CDC, 2004 STD Surveillance Report



Chlamydia and Gonorrhea Cases in Maryland, 1995-2004

SOURCE: CDC, 2004 STD Surveillance Report

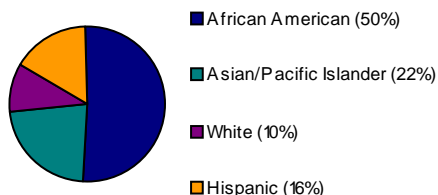


Tuberculosis

TB Cases by Race/Ethnicity, through 2003

*N = 268

SOURCE: CDC, 2003TB Surveillance Report



*Percentage totals may be greater or less than 100 due to rounding or missing data.

Although rates of tuberculosis (TB) infection in the U.S. have declined substantially since 1992, rates among foreign-born persons continued to increase. In 2003, Maryland reported

- ❑ The 14th highest rate of TB in the U.S.
- ❑ A total of 268TB cases with 52% affecting African Americans and 24% affecting Asian/Pacific Islanders. In all, about 65% were among foreign-born persons.

Program Initiatives Supported by CDC

HIV/AIDS

Sisters Together and Reaching in Baltimore, Maryland is a community-based organization whose goals are to reduce the rate of infection and transmission of HIV and other sexually transmitted diseases in at-risk, hard-to-reach African-American women in Baltimore City and to help link indigent African-American women to a continuum of care that helps them maintain a healthy lifestyle. Client-centered prevention plans and individualized behavioral interventions are key components of this program.

Sexually Transmitted Diseases (STDs)

Over the years, the Maryland Department of Health and Mental Hygiene, STD Program (MSTDP) has established and expanded public health partnerships with key community stakeholders. One of the most productive collaborations is with adult and juvenile detention facilities. STD testing, treatment, and referral services at correctional facilities reach individuals disproportionately affected by STD, providing care for at-risk populations who may not have access to health care services. Gonorrhea, chlamydia, and syphilis screening are available at all juvenile detention facilities statewide and key adult jail facilities, such as the Baltimore City Booking and Intake Center. The STD testing at these sites has been extremely productive in identifying disease, treating patients, and preventing the spread of disease in communities upon release of detainees. The MSTDP monitors and evaluates the corrections screening programs and seeks ways to expand screening coverage and treatment.

Tuberculosis (TB)

In 2002, a jail project was launched with high-level support from the Maryland Department of Public Safety and Correctional Services. The project included a systematic observation of TB symptom screening at the Central Booking Intake Facility to determine the degree to which TB symptom questions were asked appropriately and effectively. The project evaluated the time it took to provide a medical screening to inmates who were identified with TB symptoms, the timeliness of tuberculin skin testing (TST) after intake and the implementation of TB contact investigations.

National Center for HIV, STDs & TB Prevention Funding to Maryland, 2005 (US\$)

HIV/AIDS	\$16,735,101
STDs	\$4,883,181
TB	\$1,310,668

Health Officials

Maryland Health Official: S. Anthony McCann

Email: smccann@dhmh.state.md.us **Phone:** (410) 767-6505

AIDS Director:

Naomi Tomoyasu, Acting Director
AIDS Administration
Maryland Dept of Hlth & Mental Hygiene
500 North Calvert Street
Baltimore, MD 21202
(410) 767-5013
solomonl@dhmh.state.md.us

STD Director:

Barbara Conrad
Division Chief, STDs
Maryland Dept of Hlth & Mental Hygiene
201 West Preston Street
Baltimore, MD 21201
(410)-767-6686
bconrad@dhmh.state.md.us

TB Controller:

Nancy Baruch, Chief, Division of TB Control
Maryland Dept of Hlth & Mental Hygiene
201 West Preston Street
Baltimore, MD 21201
(410) 767-6698
baruchn@dhmh.state.md.us